

22713 U.S.PTO
032404

**TRANSMITTAL OF
UTILITY
APPLICATION
UNDER 37
C.F.R. §1.53**

| | |
|----------------------|-----------------|
| Attorney Docket No. | 22908-1239 |
| First named inventor | Von Seggern |
| Express mail label # | EV 399294456 US |
| Date of mailing | March 24, 2004 |

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| Application Elements | Accompanying Application Papers |
|--|--|
| 1. [X] Fee Transmittal Form 2. [X] Specification containing <u>161</u> pages (including Claims and Abstract) and a Sequence Listing (<u>121</u> pages). a. Title: <i>ADENOVIRUS PARTICLES WITH ENHANCED INFECTIVITY OF DENDRITIC CELLS AND PARTICLES WITH DECREASED INFECTIVITY OF HEPATOCYTES</i> b. Number of claims: <u>48</u> 3. [] <u>35</u> Sheets of drawings with <u>27</u> Figs. 4. [] Unexecuted Declaration listing name of inventor 5. [X] Sequence Listing <input checked="" type="checkbox"/> Paper copy (<u>121</u> pages) (identical to computer copy) <input checked="" type="checkbox"/> Computer readable copy <input checked="" type="checkbox"/> Verified statement | 6. [] Copy of assignment from prior 7. [] Unexecuted Small Entity Statement 8. [] Preliminary Amendment 9. [X] Return Receipt Postcard |
| SIGNATURE OF ATTORNEY/AGENT | |
| FISH & RICHARDSON P.C.  Stephanie Seidman Registration Number: 33,779 | |

[X] Benefit of priority is claimed under 35 U.S.C. §119(e) to U.S. provisional application Serial No. 60/459,000, filed March 28, 2003, and to U.S. provisional application Serial No. 60/467,500, filed May 1, 2003. The subject matter of each of these applications is incorporated by reference herein.

| CORRESPONDENCE ADDRESS | |
|-------------------------------|--|
| NAME | Stephanie Seidman Registration No. 33,779 FISH & RICHARDSON P.C. |
| Address | 12390 El Camino Real, San Diego, CA 92130-2081 |
| | Telephone: (858) 678-5070 Facsimile: (202) 626-7796 |

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**FEE TRANSMITTAL
ACCOMPANYING UTILITY
APPLICATION UNDER
37 C.F.R. §1.53**

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FEE CALCULATION FOR CLAIMS AS AMENDED

| | | |
|----|--|-------------------|
| a) | Basic Fee | \$ 770.00 |
| b) | Independent Claims $\frac{1}{1} - 3 = \frac{0}{0} \times \$ 86.00$ | \$ 0.00 |
| c) | Total Claims $\frac{48}{48} - 20 = \frac{28}{28} \times \$ 18.00$ | \$ 504.00 |
| d) | Fee for Multiple Dependent Claims - \$290.00 | \$ 0.00 |
| | TOTAL FILING FEE | \$1,274.00 |

- [] Executed Statement(s) of Status as Small Entity reducing Fee by one-half to \$.00
- [X] A check in the amount of \$1,274.00 to cover the fee for filing the application.
- [] Charge \$.00 to Deposit Account No. 06-1050.
- [X] The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1050. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1050 during the entire pendency of this application. This sheet is filed in duplicate.

CORRESPONDENCE ADDRESS

| | | | |
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| | Telephone: (858) 678-5070 | Facsimile: (202) 626-7796 | |
| Submitted by: | | | |
| Typed or printed name | Stephanie Seidman | Reg. Number | 33,779 |
| Signature | | Date | 03/24/04 |
| | | Deposit Account | 06-1050 |